



## REQUEST FOR HEARING

Person Requesting a Hearing: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone #: \_\_\_\_\_

I, \_\_\_\_\_, do not agree with the decision of the City of Chandler's Housing and Redevelopment Division and I am therefore requesting a Hearing.

Nature of the grievance and relevant information:

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Action or relief requested:

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Tenant's Signature \_\_\_\_\_

Date \_\_\_\_\_

### *For Office Use Only*

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Request Referred To: ☐ Housing Specialist ☐ Housing Supervisor ☐ Other: \_\_\_\_\_

Action Taken: \_\_\_\_\_